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## BIB DATA SHEET

CONFIRMATION NO. 4347

<b>SERIAL NUMBER</b> 10/585,694	<b>FILING or 371(c) DATE</b> 09/11/2006 <b>RULE</b>	<b>CLASS</b> 206	<b>GROUP ART UNIT</b> 3728	<b>ATTORNEY DOCKET NO.</b> Q95670		
<b>APPLICANTS</b> Michel Quoniam, La Madeleine de Nonancourt, FRANCE; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/FR05/50014 01/11/2005 <b>** FOREIGN APPLICATIONS *****</b> FRANCE 0400313 01/14/2004 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 11/19/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/KING M CHU/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> SUGHRUE MION, PLLC 2100 PENNSYLVANIA AVENUE, N.W. SUITE 800 WASHINGTON, DC 20037 UNITED STATES						
<b>TITLE</b> Blister Strip for an Inhaler						
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			